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| SERIAL NUMBER 10/054,437 | FILING DATE 01/18/2002 RULE | CLASS 382 | GROUP ART UNIT 2625 | ATTORNEY DOCKET NO. 5809.P002 |
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/14/2002

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|---|------------------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY NETHERLANDS | SHEETS DRAWING 10 | TOTAL CLAIMS 25 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials | | | | |

ADDRESS

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TITLE

Method and apparatus for correction of mammograms for non-uniform breast thickness

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| FILING FEE RECEIVED 830 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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